

APR 26 2005

PTO/SB/30  
0054.0029

<b>REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL</b>	Application Number:	09/579,864
	Filing Date:	May 25, 2000
	First Named Inventor:	B. Hawks et al.
	Group Art Unit:	2145
	Examiner Name:	Adnan M. Mirza
	Atty Docket Number:	STL920000034US1

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application.  
**NOTE:** 37 C.F.R. § 1.114 is effective on May 29, 2000.

**1. Submission required under 37 C.F.R. § 1.114**

a. ☒ Previously submitted

i. ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on 2/28/2005.

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_.

iii. ☐ Other \_\_\_\_.

b. ☒ Enclosed

i. ☒ Amendment/Reply, 14 pages | 04/28/2005 DTESSEN1 00000092 090460 09579864

ii. ☒ Fee Transmittal Form | 01 FC:1801 790.00 DA

iii. ☒ Petition for Extension of Time (1 Month)

**2. Miscellaneous**

a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_ months. (Fee of \$ \_\_\_\_ under 37 C.F.R. § 1.17(i) is enclosed.)

b. ☐ Other \_\_\_\_.

**3. Fees**

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 09-0460.

i. ☒ RCE fee required under 37 C.F.R. § 1.17(e)

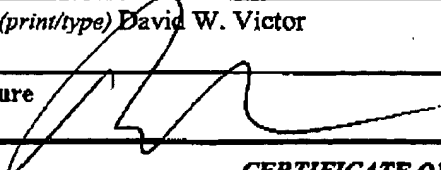
ii. ☒ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)

iii. ☒ Charge Any Deficiency.

b. ☐ Check in the amount of \$ \_\_\_\_ is enclosed.

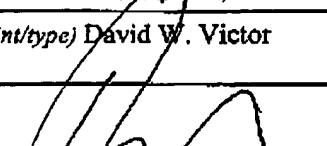
c. ☐ Payment by credit card (Form PTO-2038 enclosed) for extending One Month Extension of Time to Two Month Extension.

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED**

Name (print/type) <u>David W. Victor</u>	Registration No. <u>Registration No. 39,867</u>
Signature 	Date <u>April 26, 2005</u>

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being transmitted by facsimile to Adnan M. Mirza of the U.S. Patent and Trademark Office at 703-872-9306 on April 26, 2005.

Name (print/type) <u>David W. Victor</u>
Signature  Date <u>April 26, 2005</u>

**KONRAD RAYNES & VICTOR, LLP**

315 S. Beverly Drive, Suite 210  
Beverly Hills, California 90212

Telephone: (310) 556-7983  
Facsimile: (310) 556-7984

**FAX COVER SHEET****PLEASE DELIVER THIS FACSIMILE  
TO EXAMINER ADNAN M. MIRZA**

TO: Commissioner for Patents  
Attn: Examiner Adnan M. Mirza  
Group Art Unit 2145  
Patent Examining Corps  
Facsimile Center  
Washington, D.C. 20231

FROM: David W. Victor

OUR REF: 0054.0029  
TELEPHONE: 310-556-7983

Total pages, including cover letter: 20

**PTO FAX NUMBER 1-703-872-9306**

If you do NOT receive all of the pages, please telephone us at 310/556-7983, or fax us at 310/556-7984.

Description of Documents Transmitted: REQUEST FOR CONTINUED  
EXAMINATION (RCE)

Applicant: B.C. Hawks et al.  
Serial No.: 09/579,864  
Filed: May 25, 2000  
Group Art Unit: 2145  
Docket No.: STL920000034US1

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April 26, 2005

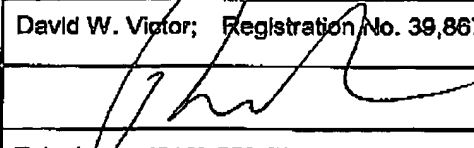
By:   
Name: David W. Victor

PTO/SB/17  
0054.0029

<b>FEE TRANSMITTAL</b>	<b>Application Number</b>	09/579,864
<b>for FY 2005</b>	<b>Filing Date</b>	May 25, 2000
	<b>Inventor</b>	B.C. Hawks et al.
	<b>Group Art Unit</b>	2145
	<b>Examiner Name</b>	Adnan M. Mirza
<b>Total Amount of Payment: \$910.00</b>	<b>Attorney Docket Number</b>	STL920000034US1

<p><b>METHOD OF PAYMENT (check one)</b></p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the indicated fees and/or credit any overpayments to Deposit Account Number: 09-0460  <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 and 1.17  <input checked="" type="checkbox"/> Charge any deficiency or credit any overpayment</p> <p>2. <input type="checkbox"/> Payment enclosed:  <input type="checkbox"/> Chk. No. _____ for \$ _____  <input type="checkbox"/> Chk. No. _____ for \$40  <input type="checkbox"/> Credit Card Approval for _____</p> <p><b>FEE CALCULATION</b></p> <p>1. <input type="checkbox"/> BASIC FILING FEE  Utility Filing Fee:  Large Entity Fee Code 1011 \$300.00</p> <p>2. <input type="checkbox"/> UTILITY SEARCH FEE \$500.00</p> <p>3. <input type="checkbox"/> UTILITY EXAMINATION FEE \$200.00</p> <p>4. <input type="checkbox"/> EXTRA CLAIMS FEES  Total Claims ____ - 20* x \$50= \$ ____  Ind. Claims ____ - 3* x \$200= \$ ____  Multiple Dependent 0 x \$360= \$0</p> <p>Subtotal \$ ____</p> <p>*(or number previously paid for)</p>	<p><b>FEE CALCULATION (continued)</b></p> <p>3. ADDITIONAL FEES (large entity)</p> <table border="0"> <tr> <td><input type="checkbox"/> Surcharge- late filing fee or oath</td> <td>\$130</td> </tr> <tr> <td><input type="checkbox"/> Surcharge- late provisional filing fee or cover sheet</td> <td>\$50</td> </tr> <tr> <td><input type="checkbox"/> Non-English specification</td> <td>\$130</td> </tr> <tr> <td><input type="checkbox"/> International type search report</td> <td>\$40</td> </tr> <tr> <td><input type="checkbox"/> Requesting publication of SIR prior to action</td> <td>\$920</td> </tr> <tr> <td><input type="checkbox"/> Requesting publication of SIR after action</td> <td>\$1840</td> </tr> <tr> <td><input checked="" type="checkbox"/> Extension for reply- first month</td> <td>\$120</td> </tr> <tr> <td><input type="checkbox"/> Extension for reply- second month</td> <td>\$450</td> </tr> <tr> <td><input type="checkbox"/> Extension for reply- third month</td> <td>\$1020</td> </tr> <tr> <td><input type="checkbox"/> Extension for reply- fourth month</td> <td>\$1590</td> </tr> <tr> <td><input type="checkbox"/> Extension for reply- fifth month</td> <td>\$2160</td> </tr> <tr> <td><input type="checkbox"/> Notice of Appeal</td> <td>\$500</td> </tr> <tr> <td><input type="checkbox"/> Brief in Support of Appeal</td> <td>\$500</td> </tr> <tr> <td><input type="checkbox"/> Request for Oral Hearing</td> <td>\$1000</td> </tr> <tr> <td><input type="checkbox"/> Utility issue fee</td> <td>\$1400</td> </tr> <tr> <td><input type="checkbox"/> Petition to revive (unavoidable)</td> <td>\$500</td> </tr> <tr> <td><input type="checkbox"/> Petition to revive (unintentional)</td> <td>\$1500</td> </tr> <tr> <td><input type="checkbox"/> Petitions to the Commissioner</td> <td>\$130</td> </tr> <tr> <td><input type="checkbox"/> Petitions related to provisional applications</td> <td>\$50</td> </tr> <tr> <td><input type="checkbox"/> Submission of Information Disclosure Statement</td> <td>\$180</td> </tr> <tr> <td><input type="checkbox"/> Recordation of Assignment</td> <td>\$40</td> </tr> <tr> <td><input type="checkbox"/> Submission after final (37 CFR 1.129(a))</td> <td>\$790</td> </tr> <tr> <td><input checked="" type="checkbox"/> Request for Continued Examination (RCE)</td> <td>\$790</td> </tr> <tr> <td><input type="checkbox"/> Other:</td> <td></td> </tr> </table> <p><b>SUBTOTAL \$910</b></p>	<input type="checkbox"/> Surcharge- late filing fee or oath	\$130	<input type="checkbox"/> Surcharge- late provisional filing fee or cover sheet	\$50	<input type="checkbox"/> Non-English specification	\$130	<input type="checkbox"/> International type search report	\$40	<input type="checkbox"/> Requesting publication of SIR prior to action	\$920	<input type="checkbox"/> Requesting publication of SIR after action	\$1840	<input checked="" type="checkbox"/> Extension for reply- first month	\$120	<input type="checkbox"/> Extension for reply- second month	\$450	<input type="checkbox"/> Extension for reply- third month	\$1020	<input type="checkbox"/> Extension for reply- fourth month	\$1590	<input type="checkbox"/> Extension for reply- fifth month	\$2160	<input type="checkbox"/> Notice of Appeal	\$500	<input type="checkbox"/> Brief in Support of Appeal	\$500	<input type="checkbox"/> Request for Oral Hearing	\$1000	<input type="checkbox"/> Utility issue fee	\$1400	<input type="checkbox"/> Petition to revive (unavoidable)	\$500	<input type="checkbox"/> Petition to revive (unintentional)	\$1500	<input type="checkbox"/> Petitions to the Commissioner	\$130	<input type="checkbox"/> Petitions related to provisional applications	\$50	<input type="checkbox"/> Submission of Information Disclosure Statement	\$180	<input type="checkbox"/> Recordation of Assignment	\$40	<input type="checkbox"/> Submission after final (37 CFR 1.129(a))	\$790	<input checked="" type="checkbox"/> Request for Continued Examination (RCE)	\$790	<input type="checkbox"/> Other:	
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Submitted by:

<b>Firm or Individual Name:</b>	David W. Victor; Registration No. 39,867	<b>Customer No.</b> 47069
<b>Signature:</b>		
<b>Date: April 26, 2005</b>	<b>Telephone: (310) 553-7977</b>	